## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10161625

		S	MALL E	NTITY		OTHER	THAN					
_		· · · · · · · · · · · · · · · · · · ·	(Column	n 1) (Column 2)			TYPE			OR	•	
TOTAL CLAIMS			38				١	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ē	BASIC FEE	385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	3 € minus 20=		.18			X\$ 9=		OR	X\$18=	324
INI	DEPENDENT C	LAIMS	€ m	inus 3 =	<u>.</u> 3			X43=		OR	X86=	258
Μl	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column							L	TOTAL		OR	TOTAL	135 2
	C					OTHER	THAN					
(Column 1)			T	(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
TOTAL										00	TOTAL	-
		(Caluma 4)		<b>(0</b> -1	O\	(O-1 0)	AE	DIT. FEE	<del></del>	,	ADDIT. FEE	
	<del></del>	(Column 1) CLAIMS		(Colum		(Column 3)	. –					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**				X\$ 9=		OR	X\$18=	
AME	Ind pendent	* NTATION OF MU	Minus	***	01.444.4			X43=		OR	X86=	
	FIRST PRESE	NIATION OF MC	LIPLE DEP	ENDENT	CLAIM			+145 <b>=</b>		OR	+290=	
								TOTAL	· · · ·	OR ,	TOTAL	
		(O-t 1)					AD	DIT. FEE L		J A	ADDIT. FEE	
-1	. \	(Column 1)	, 1	(Colum HIGHE		(Column 3)	_	. '		_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	,	RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		<b>(\$ 9=</b>		OR	X\$18=	
	Independent		Minus	***		±		K43=			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ľ			OR	A00=	
* If th ntry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=	
**	the "Highest Nur	nber Previously Pai	d For IN THIS	SPACE is I	ess than	20. enter "20."	ADI	TOTAL DIT. FEE		OR A	TOTAL	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriat box in column 1.												